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**Vossius & Partner**  
**Siebertstrasse 4**  
**81675 München**

**Nr. der Anmeldung / Application No. / Demande de brevet no**

**PCT/EP 2004 / 006005**

**Tag des Eingangs / Date of receipt / Date de réception**

**03.06.04**

**Zeichen des Anmelders / Vertreter - Applicant / Representative ref. no. - Référence du demandeur ou du mandataire**

**G5455 PCT**

**Anmelder / Applicant / Demandeur :** **Umicore AG & Co. KG**

**Datum / Date** **04.06.04**

**Empfangsbescheinigung / Receipt for documents / Récépissé de documents**

**Das Europäische Patentamt bescheinigt hiermit den Empfang folgender Dokumente.**  
**The European Patent Office hereby acknowledges the receipt of the following:**  
**L'Office européen des brevets accorde réception des documents indiqués ci-dessous:**

**A. Internationale Anmeldung / International application / Demande internationale**

**Stückzahl / No. of copies / Nombre d'exemplaires**

<input checked="" type="checkbox"/> Antrag / Request / Requête	1	<input type="checkbox"/> Kopie der allgemeinen Vollmacht	
<input checked="" type="checkbox"/> Beschreibung (ohne Sequenzprotokollteil) Description (excluding sequence listing part)		<input type="checkbox"/> Copy of general power of attorney	
<input checked="" type="checkbox"/> Description (sauf partie réservée au listage des séquences)	3	<input checked="" type="checkbox"/> Copie du pouvoir général	
<input checked="" type="checkbox"/> Patentansprüche / Claim(s) / Revendication(s)	3	<input checked="" type="checkbox"/> Prioritätsbeleg(e)	
<input checked="" type="checkbox"/> Zusammenfassung / Abstract / Abrégé	3	<input checked="" type="checkbox"/> Priority document(s)	1
<input checked="" type="checkbox"/> Zeichnung(en) / Drawing(s) / Dessin(s)	3	<input type="checkbox"/> Document(s) de priorité	
		<input type="checkbox"/> Blatt für die Gebührenberechnung	
		<input type="checkbox"/> Fee calculation sheet	
		<input type="checkbox"/> Feuille de calcul des taxes	
		<input type="checkbox"/> Abbuchungsauftrag	
		<input type="checkbox"/> Debit order	Währung/Currency/Monnaie
		<input type="checkbox"/> Ordre de débit	Betrag/Amount/Montant
<input type="checkbox"/> Sequenzprotokollteil der Beschreibung Sequence listing part of description		<input type="checkbox"/> Scheck	Ausfüllung freigestellt /
<input type="checkbox"/> Partie de la description réservée au listage des séquences		<input type="checkbox"/> Cheque	Optional / facultatif
<input type="checkbox"/> Diskette / Disquette		<input type="checkbox"/> Chèque	
		<input type="checkbox"/> Sonstige Unterlagen (einzeln aufführen)	
		<input type="checkbox"/> Other documents (specify)	
		<input type="checkbox"/> Autres documents (préciser)	

**B. Beigefügte Dokumente / Accompanying documents / Eléments joints**

**Gesonderte unterzeichnete Vollmacht**  
 **Separate signed power of attorney**

Die genannten Unterlagen sind am oben genannten Tag eingegangen. Die in der Kontrolliste (Feld VIII) des PCT-Antragsformulars RO/101 angegebenen Blattzahlen wurden bei Eingang nicht geprüft. Die Anmeldung hat ebenfalls oben angeführte Anmeldenummern erhalten / The said items were received on the date indicated above. No check was made on receipt that the number of sheets indicated in the check list (field VIII) of the PCT Request Form RO/101 were correct. The application has been assigned the above indicated application number / Les documents mentionnés ont été reçus à la date indiquée. L'exactitude du nombre de feuilles indiqué au bordereau (cadre VIII) du formulaire de demande PCT RO/101 n'a pas été vérifiée lors de l'entrée. La demande figurent ci-dessous a été attribuée le numéro de brevet /

Unterschrift / Autostempel / Signature / Official Stamp / Signature / Cachet officiel

**Europäisches Patentamt**

**European Patent Office**

**Office européen des brevets**

**D-80298 München**

# PCT

## REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference  
(if desired) (12 characters maximum) G5455 PCT

### Box No. I TITLE OF INVENTION

Method and apparatus for determining the activity and aging behavior of a catalyst

### Box No. II APPLICANT

This person is also inventor

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

Umicore AG & Co. KG  
Rodenbacher Chaussee 4  
63457 Hanau-Wolfgang  
Germany

Telephone No.

Facsimile No.

Teleprinter No.

Applicant's registration No. with the Office

State (that is, country) of nationality:  
DE

State (that is, country) of residence:  
DE

This person is applicant  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

### Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

GIESHOFF, Jürgen  
Am Burgwerksrain 10  
63599 Biebergemünd  
Germany

This person is:

applicant only

applicant and inventor

inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:  
DE

State (that is, country) of residence:  
DE

This person is applicant  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

Further applicants and/or (further) inventors are indicated on a continuation sheet.

### Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as:

agent

common representative

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

Vossius & Partner  
Siebertstraße 4  
81675 Munich  
Germany

Telephone No.

+49 89 41 30 40

Facsimile No.

+49 89 41 30 4111

Teleprinter No.

Agent's registration No. with the Office

Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

## Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

If none of the following sub-boxes is used, this sheet should not be included in the request.

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

FINKENBEINER, Hartmut  
Berger Weg 3  
72270 Baiersbronn  
Germany

This person is:

applicant only  
 applicant and inventor  
 inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:  
DEState (that is, country) of residence:  
DE

This person is applicant for the purposes of:  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

LOX, Egbert  
Am Lärchentor 8  
36355 Hochwaldhausen  
Germany

This person is:

applicant only  
 applicant and inventor  
 inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:  
BEState (that is, country) of residence:  
DE

This person is applicant for the purposes of:  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

KREUZER, Thomas  
Philipp-Reis-Str. 13  
61184 Karben  
Germany

This person is:

applicant only  
 applicant and inventor  
 inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:  
DEState (that is, country) of residence:  
DE

This person is applicant for the purposes of:  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

This person is:

applicant only  
 applicant and inventor  
 inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

State (that is, country) of residence:

This person is applicant for the purposes of:  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

Further applicants and/or (further) inventors are indicated on another continuation sheet.

**Box No. V DESIGNATIONS**

The filing of this request constitutes under Rule 4.9(a), the designation of all Contracting States bound by the PCT on the international filing date, for the grant of every kind of protection available and, where applicable, for the grant of both regional and national patents.

However,

- DE Germany is not designated for any kind of national protection
- KR Republic of Korea is not designated for any kind of national protection
- RU Russian Federation is not designated for any kind of national protection

*(The check-boxes above may be used to exclude (irrevocably) the designations concerned in order to avoid the ceasing of the effect, under the national law, of an earlier national application from which priority is claimed. See the Notes to Box No. V as to the consequences of such national law provisions in these and certain other States.)*

**Box No. VI PRIORITY CLAIM**

The priority of the following earlier application(s) is hereby claimed:

Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:		
		national application: country or Member of WTO	regional application:*	international application: receiving Office
item (1) 04/06/2003 04 June 2003	103 25 292.4	DE		
item (2)				
item (3)				

- Further priority claims are indicated in the Supplemental Box.

The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) *(only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office)* identified above as:

- all items
- item (1)
- item (2)
- item (3)
- other, see Supplemental Box

*\* Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(ii)): . . . .*

**Box No. VII INTERNATIONAL SEARCHING AUTHORITY**

Choice of International Searching Authority (ISA) *(if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):*

ISA / EPO . . . . .

Request to use results of earlier search; reference to that search *(if an earlier search has been carried out by or requested from the International Searching Authority):*

Date (day/month/year)

Number

Country (or regional Office)

**Box No. VIII DECLARATIONS**

The following declarations are contained in Boxes Nos. VIII (i) to (v) *(mark the applicable check-boxes below and indicate in the right column the number of each type of declaration):*

Number of declarations

<input type="checkbox"/> Box No. VIII (i)	Declaration as to the identity of the inventor	:
<input type="checkbox"/> Box No. VIII (ii)	Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent	:
<input type="checkbox"/> Box No. VIII (iii)	Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application	:
<input type="checkbox"/> Box No. VIII (iv)	Declaration of inventorship (only for the purposes of the designation of the United States of America)	:
<input type="checkbox"/> Box No. VIII (v)	Declaration as to non-prejudicial disclosures or exceptions to lack of novelty	:

## Box No. IX CHECK LIST; LANGUAGE OF FILING

This international application contains:		This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):		Number of items
(a) in paper form, the following number of sheets:		1. <input type="checkbox"/> fee calculation sheet 2. <input type="checkbox"/> original separate power of attorney 3. <input type="checkbox"/> original general power of attorney 4. <input type="checkbox"/> copy of general power of attorney; reference number, if any: ..... 5. <input type="checkbox"/> statement explaining lack of signature 6. <input checked="" type="checkbox"/> priority document(s) identified in Box No. VI as item(s): DE 103.25.292.4 ..... 7. <input type="checkbox"/> translation of international application into (language): ..... 8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material 9. <input type="checkbox"/> sequence listing in computer readable form (indicate type and number of carriers) (i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application) (ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter (iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listing mentioned in left column 10. <input type="checkbox"/> tables in computer readable form related to sequence listing (indicate type and number of carriers) (i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application) (ii) <input type="checkbox"/> (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater) (iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column 11. <input type="checkbox"/> other (specify): .....		
request (including declaration sheets)	: 4			
description (excluding sequence listing and/or tables related thereto)	: 7			
claims	: 3			
abstract	: 1			
drawings	: 2			
Sub-total number of sheets	: 17			
sequence listing	:			
tables related thereto	:			
(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)	.....			
Total number of sheets	: 17			
(b) <input type="checkbox"/> only in computer readable form (Section 801(a)(i))		10. <input type="checkbox"/> tables in computer readable form related to sequence listing (indicate type and number of carriers)		
(i) <input type="checkbox"/> sequence listing		(i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application)		
(ii) <input type="checkbox"/> tables related thereto		(ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter		
(c) <input type="checkbox"/> also in computer readable form (Section 801(a)(ii))		(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listing mentioned in left column		
(i) <input type="checkbox"/> sequence listing		(i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application)		
(ii) <input type="checkbox"/> tables related thereto		(ii) <input type="checkbox"/> (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater)		
Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the		(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column		
<input type="checkbox"/> sequence listing: .....		11. <input type="checkbox"/> other (specify): .....		
<input type="checkbox"/> tables related thereto: .....				
(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)				
Figure of the drawings which should accompany the abstract:	1	Language of filing of the international application:		English

## Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).

Axel Stellbrink

European Patent Attorney

Vossius & Partner  
Siebertstr. 4  
81675 München  
(Nr. 31)

For receiving Office use only	
1. Date of actual receipt of the purported international application:	
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:	
4. Date of timely receipt of the required corrections under PCT Article 11(2):	
5. International Searching Authority (if two or more are competent): ISA /	
6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid	
2. Drawings: <input type="checkbox"/> received: <input type="checkbox"/> not received:	

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Date of receipt of the record copy by the International Bureau:

# PCT

## FEE CALCULATION SHEET Annex to the Request

For receiving Office use only

International Application No.

Applicant's or agent's  
file reference

G5455 PCT

Date stamp of the receiving Office

Applicant

Umicore AG & Co. KG

### CALCULATION OF PRESCRIBED FEES

1. TRANSMITTAL FEE . . . . . EUR 100.00  T

2. SEARCH FEE . . . . . EUR 1,550.00  S

International search to be carried out by EPO

(If two or more International Searching Authorities are competent to carry out the international search, indicate the name of the Authority which is chosen to carry out the international search.)

### 3. INTERNATIONAL FILING FEE

Where items (b) and/or (c) of Box No. IX apply, enter Sub-total number of sheets }  
Where items (b) and (c) of Box No. IX do not apply, enter Total number of sheets }

i1 first 30 sheets . . . . . EUR 902.00  i1

i2 \_\_\_\_\_ x 10.00 = EUR 0.00  i2  
number of sheets in excess of 30 fee per sheet

i3 additional component (only if sequence listing and/or tables related thereto are filed in computer readable form under Section 801(a)(i), or both in that form and on paper, under Section 801(a)(ii)):

400 x 10.00 = EUR  i3  
fee per sheet

Add amounts entered at i1, i2 and i3 and enter total at I . . . . . EUR 902.00  I

(Applicants from certain States are entitled to a reduction of 75% of the international filing fee. Where the applicant is (or all applicants are) so entitled, the total to be entered at I is 25% of the international filing fee.)

4. FEE FOR PRIORITY DOCUMENT (if applicable) . . . . . EUR  P

5. TOTAL FEES PAYABLE . . . . . EUR 2,552.00

Add amounts entered at T, S, I and P, and enter total in the TOTAL box

TOTAL

### MODE OF PAYMENT

authorization to charge deposit account (see below)  postal money order  cash  coupons  
 cheque  bank draft  revenue stamps  other (specify):

### AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT (This mode of payment may not be available at all receiving Offices)

Receiving Office: RO/ EPO

Authorization to charge the total fees indicated above.

Deposit Account No.: 2800.0321

(This check-box may be marked only if the conditions for deposit accounts of the receiving Office so permit) Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.

Date: July 3, 2004

Authorization to charge the fee for priority document.

Name: Axel Stellbrink

Signature: 